State of South Dakota



Candidate's or Committee's Report of Receipts and Expenditures

PACs, political party, ballot question and other committees: File with Election 500 E Capitol 4		'FN
•		~0
See pages 9 & 10 of the Guideline Book for specific instru	actions on completing this report. S.D. SEC. OF STA	U STr
Name of Candidate or Committee Wellette Cour	my nepublicions	
Complete Mailing Address Po Rox 5, W		—
Name of Person Making Report Connie M. Ha	Daytime Phone Number 605-259-3	<u>:/5</u>
If you are a candidate, what office are you seeking?		
If you are a ballot question committee, indicate which measure period and whether the measure was supported or	, ,	e
Type of Report (See pages 4 & 5 of Guideline Book)	Year End Report	
For Reporting Period Ending (See pages 4 & 5 of Guidelin	ne Book)	
The following verification must be completed before sub-	mitting report.	• •
VERIFICATION OF PERSON MAKING REPORT		
I Connie M. Hill this report and to the best of my knowledge and belief it is	(print name legibly), certify that I have examined s true, correct and complete.	
Date: 1-20-05 Candidate Si Signature of	gnature or Committee Treasurer or Chairperson	
Revised July 2001	Filed this 24th day of Chi. Melson SECRETARY OF STATE	o t

Name of Candidate or Committee Wellitle Country Republican				
For the reporting period ending $\frac{12-31-04}{}$				
combine all contributions of \$100 or contributions on their respective line year from an individual or political p amount, name, address and place of	less from individuals and the same freshelow and on the next page. Any coparty and all contributions from PAC employment (if applicable) of the consuplicated if you need more space, or you have a space of the consuplication.	Contributions of a record of all contributors, but for the compolitical parties and enter these substitution of more than \$100 or aggress must be entered as a separate item (intributor. Each type of contributor has you may attach additional sheets of parties.	ems as uniternized egate during a calendar temized) giving the their own section for	
Itemized Contributions from Indi			140	
		Place of Employment		
Name	Residence Address	(Name of Employer)		
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
		, , , , , , , , , , , , , , , , , , ,	\$	
			•	
			¢ ———	
			<u> </u>	
			3	
			>	
			\$	
			\$ <u></u>	
			\$	
			\$ <u></u>	
			\$	
			. \$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$ 	
			\$	
			s ———	
			¢ ————	
the state of the s			¢ ———	
· · · · · · · · · · · · · · · · · · ·			¢ ———	

Total of Itemized Contributions from Individuals:

700	MH CAR II	Appendix B
Name of Candidate or Committee	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
For the reporting period ending 13	1-31-04	
~		
Schedule A –	Direct Contributions (continued)	
		* None
Unitemized Contributions from Political Parties:		*\$
Itemized Contributions from Political Parties		
Party Name	Address	
		\$
		\$
Total of Itemized Contributions from Political Pa	rties:	*\$
Itemized Contributions from Political Action Con	nmittees (PAC's) - All contributions from PAC's must be	itemized.
PAC Name	Address	
		\$
		\$
		\$
		\$
	-	\$
		\$ \$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
Total of Itemized Contributions from Political Ac	tion Committees:	*\$

Total of All Direct Contributions (Sum of all lines with an *)

Name of Candidate or Committee:	Mitte County Lepublia	Appendix E
For the reporting period ending: λ	31-04	
Schedule B List on this schedule fund-raising events held to raise contributor gives more than \$100 or their contribution contributions must be itemized on Schedule A.	Fund-Raising Events Proceeds a money for the candidate and the net proceeds on results in their aggregate being more than \$10	derived from each event. If a 0 in the calendar year, those
Type or Name of Event		Net Proceeds
Total:		AME
Schedul Report all non-cash contributions of goods or service contributor, residence address and place of employm	e C - In Kind Contributions es and the estimated fair market value. If the valuent must be reported.	ue exceeds \$100, the name of the
Nature of Non-Cash Contribution	Name, Residence Address & Place of Employment	Estimated Value
T-4-1.		
Total:		None
Sch Use this schedule to report any refunds, interest earn	edule D - Other Income ed or other income which is not a direct contribu	ition.
Source of Income		Amount
Total:		h how
		111114

Name of Candidate or Committee:	mollette (menter	Republian
For the reporting period ending:	12-31-0	4	

 $Schedule\ E-Expenditures$

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

Expenses		Contributions Made to Candidates and Committees	
tem	Amount	Name of Candidate or Committee	Amount
dvertising	12.40		
Consulting			
ostage			
rinting			
Rent			
Salaries			<u>,</u>
Telephone			
Travel		- +	
J tilities			
List other expense tems below	List other expense amounts below		
	100.53	Wig Wom - Worris Meeting.	
	66.53	The points including	
	, , , , , , , , , , , , , , , , , , ,		
	_		
•			
· · · · · · · · · · · · · · · · · · ·			
	:	· · · · · · · · · · · · · · · · · · ·	
			· · · · · · · · · · · · · · · · · · ·
			
	1		

Appendix	_
Λ nnond V	
~1000CHR11X	

Name of Candidate or Comn	nittee: Willity (ninty Repub	Appendix	
For the reporting period end				
Schedule F - Debts and Obligations This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.				
Owed to:	Purpose:		Amount	
· · · · · · · · · · · · · · · · · · ·		<u></u>		
		and the second s		
		· · · · · · · · · · · · · · · · · · ·		
<u></u>				
· · · · · · · · · · · · · · · · · · ·				
			· · · · · · · · · · · · · · · · · · ·	
Total Obligations:				

Na	me of Candidate or Committee:	I ellette Country Republe	Appendix
	r the reporting period ending: /2	-31-04	
		Summary Page	
	s summary sheet will give a brief outline of all ca m the schedules previously completed.		eriod. Please transfer all totals
1.	Amount on hand, if any, at the beginning	ng of the reporting period:	<u>\$ 1743.7</u> 2
2.	Receipts		
	Schedule A - Direct Contributions	\$	
	Schedule B - Fund-Raising Events	\$	
	Schedule C - In Kind Contributions	\$	
	Schedule D - Other Income	\$	
	Total of all Receipts	\$	
3.	Total Monetary Receipts (A+B+D)		\$
4.	Candidate's Personal Contribution to O	wn Campaign	\$
5.	Monetary Loans to Candidate or Comm	nittee During Reporting Period	\$
6.	Monetary Loans Repaid During Report	ing Period	\$
7.	Expenditures - Schedule E		\$ <u>78,93</u>
8.	Unpaid Obligations - Schedule F	\$	
9.	Amount on hand at the close of this rep This should equal lines (1+3+4+5) – (6		\$ <u>1664.79</u>
		· · · · · · · · · · · · · · · · · · ·	

